

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-870)

SERIAL NO.

FILING DATE

APPLICANT'S

CLAIMS

NO.	AS FILED		AFTER 1st ALLOWANCE		AFTER 2nd ALLOWANCE	
	IHO.	OEP.	IHO.	OEP.	IHO.	OEP.
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